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CENTRAL FAX CENTER****DEC 4 - 2007****FACSIMILE INFORMATION SHEET**Name of Individual: Examiner San-Ming HuiCompany: The United States Patent and Trademark OfficeCity and State: Alexandria, VAFacsimile Number: 1-571-273-8300From: Ann Marie CannoniTotal Number of Pages: 23 (including Information Sheet)Date Transmitted: December 4, 2007Application No. 10/056,680; Docket No. CV 01492K
4686-045551

Message:

Dear Examiner Hui:

Attached herewith is a Request for Reconsideration and a
Petition for Extension of Time (3 months) and Transmittal
Form for the above-referenced patent application.

If you do not receive all pages, please call back as soon as possible. The number is (412) 471-8815.

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PTO/SB/21 (09-04)

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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/056,680
	Filing Date	January 25, 2002
	First Named Inventor	Teddy Kosoglou et al.
	Art Unit	1617
	Examiner Name	San-ming R. Hui
Total Number of Pages in This Submission	Attorney Docket Number	CV01492K


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ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Declarations of Harry Davis, Jr., Ph.D. & Madhu Chintala, Ph.D. <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts Under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks: _____		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	The Webb Law Firm		
Signature			
Printed Name	Ann M. Cannoni		
Date	December 4, 2007	Reg. No.	35,972

CERTIFICATE OF TRANSMISSION / MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:			
Signature			
Typed or printed name	Mary Ann Mulvihill	Date	December 4, 2007

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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